Conditions of Confinement Worksheet Operational Review Self-Assessment (ORSA) Over 72-Hour IGSA Facilities

Average Daily Population of Less Than Ten Detainees



Facility Name			
Anchorage Correction	nal Complex		
Address (Street an	······································		<u> </u>
1400 East 4th avenue			
City, State and Zip	Code		
Anchorage Alaska 9	9501		
County			
N/A			
Name and title of C (^{(b)(6)(b)(7)(C)} Superinte	<i>hief Executive Officer (War</i> andent	den/OIC/Superintend	lent)
Name and title of F. (6)(6)(0)(7)(C) Superinte	acility Reviewer endent, Jason Marvel Correct	ional Officer IV	·
Date[s] of Facility F			
Sig ^{(b)(6),(b)(7)(C)}			<u></u>
Fie ra ((b)(6);(b)(7)(C)	(A)FOD	7/	:
Name and Title of F	ield Officer Reviewer		

Date of Field Office Review 09/29/2017	h\/\$\:/h\/7\/\$\		
Signature of Field Office Reviewer	(b)(0),(b)(1)(C)		
Is a Corrective Action Plan Required	d?	•	
☐ YES 図 NO			

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For each standard rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. Each facility should examine the entire worksheet to identify areas of improvement including those standards where an overall finding of acceptable was achieved.

Section I

Detainee Services Standards

ACCESS TO LEGAL MATERIALS

Policy: Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.

Components	Y	Ň	N/A	Remarks
The law library contains all materials listed in the "Access to Legal Materials" standard, Attachment A. The listing of materials is posted in the law library.	⊠			The Facility uses the Lexis Nexis as the source for attachment A materials, therefore there is no requirement to post listing of materials.
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.	⊠			The East complex law library has four typewriters. The West Complex law library has four typewriters. Detainees have an adequate supply of paper and pens in both libraries.
In addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.	Ø			The facility uses Lexis Nexis in its Law Library.
Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	⊠			On average Detainees get 7.5 hours per week. If the detainee is facing court they can request additional time in the law library. This is organize by the compliance sergeant

ACCESS TO LEGAL MATERIALS							
Policy: Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.							
Components	Components Y N N/A Remarks						
☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding							

Remarks: (Record significant facts, observations, alternate source used for verification, etc.)

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re / Date

ADMISSION AND RELEASE

Policy: All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
In processing includes an orientation of the facility. The orientation includes: • Unacceptable activities and behavior, and corresponding sanctions; • How to contact ICE: • The availability of pro bono legal services • How to pursue pro bono legal services. Schedule of programs. • Services and daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library • Sick-call procedures, etc., and the detainee handbook.				The Anchorage Correctional Complex (ACC) prisoner handbooks, part I and II are a basic guide to the Department and facility operations. Also an orientation video is shown in the intake unit a minimum of three times per day, seven days a week.
Medical screenings are performed by medical staff or persons who have received specialized training for the purpose of conducting an initial health screening.	⊠			A registered nurse conducts the medical screening in the booking area during the intake process.
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.				The facility uses both a paper receipt and an on-line record for property. Detainees may request a copy.

ADMISSION AND RELEASE

Policy: All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	⊠			Hygiene items are replenished as needed. The facility has gender specific items.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.				
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	×			The probation staff using appropriate reliable information does the classifications.
The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision.	×			Policy 700.01 "Classification Policy" requires classification within 5 days of arrival.

. The admissions ment and classifical	procedure will, amo	ong otl searcl	ner thi n; and	ngs include	it ensures their health, safe e: medical screening; a file personal belongings, which
Componer		Y	N N	N/A	Remarks
⊠ Acceptable	☐ Deficient			At-Risk	☐ Repeat Finding

CLASSIFICATION SYSTEM

Policy: All facilities will develop and implement a system according to which ICE detainees are classified. The classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories

Components	Y	N	N/A	Remarks
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.				Policy 700.01 "Classification Policy" is current and describes the system in place.
	Ø			
	11			
Housing assignments are based on classification-level.				Per policy 808.09 "Prisoner Housing" prisoners are housed based on their classification level. It states that Minimum Custody and Medium Custody prisoners may be housed together in the same cell, dormitory or modular housing unit; Medium Custody and Close Custody prisoners may also be housed together in the same cell, dormitory or modular housing unit; Close Custody and Minimum Custody prisoners shall not be housed in the same cell, dormitory or modular housing unit.
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				
☑ Acceptable ☐ Deficient	.	□ A	t-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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CORRESPONDENCE AND OTHER MAIL

Policy: All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning correspondence and other mail.

Components	Y	N	N/A	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	⊠			Policy 810.03 "Prisoner Mail" describes the correspondence procedures. This information is also listed in the handbook that is posted in the common area of every housing unit.
Staff maintains a written record of every item removed from detainee mail.				Any time mail is received with enclosed contraband that may constitute a violation of the law, the mail (with the item still in it), is given to the Security Sergeant and a chain of evidence form is filled out.
Every indigent detainee has the opportunity to mail, at government expense: Reasonable correspondence about a legal matter: Three one ounce letters per week: Packages deemed necessary by ICE.	×			As stated in the prisoner handbook and policy 810.03, indigent detainees can send out 5 pieces of mail a week.
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.				Detainees can purchase stamps through the commissary. Detainees are not restricted on the amount of mail that can be sent out.

CORRESPONDENCE AND OTHER MAIL Policy: All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning				
correspondence and other mail. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Ø			
☑ Acceptable ☐ Deficient			At-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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DETAINEE HANDBOOK

Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N	N/ A	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).				The handbook is written in English. Part 1 has been translated to Spanish
The detainee handbook states in clear language basic detainee responsibilities.	⊠			
The handbook describes the detainee disciplinary policy and procedures: Including: Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process.	×			The Prisoner Handbook Part I states prohibited acts and severity, time limits in the process and a summary of the disciplinary process.
The grievance section of the handbook explains all steps in the grievance process—Including: Informal (if used) and formal grievance procedures; The appeals process; In CDF facilities: procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance.				The prisoner handbook list all the steps in the grievance process.

DETAINEE HANDBO(OK	
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Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Y	N	N/ A	Remarks
How to file a complaint about officer misconduct with the Department of Homeland Security.				
The detainee handbook describes the medical sick call procedures for general population and segregation.	×			The prisoner handbooks describe the medical sick call procedures.
The handbook specifies the rights and responsibilities of all detainees.	\boxtimes			The prisoner handbooks specify the rights and responsibilities of all detainees.
		□ A	t-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C)	9-22-17
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Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
The food service program is under the direct supervision of a professionally trained and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.				The manager is a certified food service administer and is ServSafe certified. The manager determines the responsibility of the food service staff.
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	×			Breakfast is served at 0630. Lunch at 1100 and dinner at 1630 meeting the 14 hour requirements. At least two hot meals are served daily.
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	⊠			The East and West Complex kitchens have knife cabinets that close and are secured with padlocks. The Food service Supervisor (FSS) or on-duty cook foreman maintains control of the keys.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensits	⊠			The FSS monitors the condition of the knives and dinning utensits. The knives are secured with wire rope and locked to the workstation.

FO	OD	SE	RVI	CF

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
The food service program addresses medical diets.				There are medical diet menus to address medical diets. Examples are diabetic diets, high protein diets, etc.
The food service staff instructs detained volunteers on: a. Personal cleanliness and hygiene. b. Sanitary techniques for preparing, storing, and serving food, and c. The sanitary operation, care, and maintenance of equipment.				Food service staff provides verbal training on all items for this step.
Standard operating procedures include weekly inspections of all food service areas, as well as dining and food preparation areas and equipment.	⊠			Policy and procedure 805.02 "food service safety and sanitation" states when inspections are to be completed. Daily and weekly inspections are conducted by facility staff.
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	⊠			All foods are purchased from a contractual vendor and inspected for damage, contamination and pest infestation.

Pollcy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	⊠			The completed nutritional analysis is on file for the master cycle menus, conducted by a registered dietitian.
The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA	⊠			The cook foreman can change the menu with documentation provided to the FSA.
A common-fare menu available to detainees whose dietary requirements cannot be met on the main. Changes to the planned commonfare menu can be made at the facility level. Hot entrees are offered three times a week. The common-fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provides hot water for instant beverages and foods. Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.	\boxtimes			A common-fare men/program is in place, and kosher meals are provided when approved by the chaplain.
The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common-Fare	×			Muslims are provided meals from the schedule provided by the chaptain. Passover meals are provided to those who request them. A vegetarian menu is available.

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
Program receive the same Kosher- for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.				
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served.				Temperatures of food are maintained at safe levels when placed on the serving lines.
All meals provided in nutritionally adequate portions.	\boxtimes			The portions on the trays meet the portions listed on the menu, which provides 2300 calories or more daily.
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes			

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?				Policy and Procedure 805.02 "Food Service Safety and Sanitation" states when inspections are to be completed. Daily and weekly inspections are conducted by facility staff.
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.				The facility documents the temperature checks on a dishwater temperature sheet.
Staff documents the results of every refrigerator/ freezer temperature check.	×			The temperature checks are recorded on freezer/cooler temperatures.
	۵,			
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				All foods are purchased from a vendor and inspected for damage, contamination and pest infestation.
☑ Acceptable ☐ Deficient		☐ At	-Risk	Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C) (ure / Date

FUNDS AND PERSONAL PROPERTY Policy: All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property. Standard NA: (IGSA ONLY) Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.							
Components	Y	N	N/ A	Remarks			
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only	⊠			Per policy and Procedure 811.05 "Prisoner Personal Property" property and funds are properly separated and stored. The valuables are stored in locked file cabinets in the property room. Only designated supervisors have access to storage areas.			
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?				Per policy and Procedure 811.05 "Prisoner Personal Property" staff itemizes funds and property, including valuables, on the approved inventory forms upon arrival. The inventory is maintained electronically.			
Staff forwards an arriving detainee's medication to the medical staff.				Per policy 811.05 and 807.05, all medications are turned over to the medical department.			

FUNDS AND	PERS	ONAL	PROP	ERTY		
Policy: All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property. Standard NA: (IGSA ONLY) Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.						
Staff follows written procedures when returning property to detainees. Inventory forms are used to identify property to be returned to the detainee and signatures are require Written procedures are contained in P&P 811.05.						
The facility disposes of abandoned property in accordance with written procedures. If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.				The facility disposes of abandoned property in accordance with written procedures. Standard Operating Procedure 61.811.05 "		
☑ Acceptable ☐ Deficient		☐ A	t-Risk	☐ Repeat Finding		
Remarks: (Record significant facts, observations, other sources used, etc.) (b)(6)(b)(7)(C) 9-32-17 2 / Date						

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GROUP LEGA	L RIGH	TS PRE	SENT	ATIONS
Policy: Facilities housing ICE detainees shall of detainees for the purpose of informing them security and orderly operation of each facility. I about the immigration system and their rights a	of U.S. ICE enc	immigr ourages	ration la s such i	w and procedures, consistent with the
☐ Check here if No Group Presentations was Acceptable overall and continue on with	ere con next po	ducted ortion o	within f work	the past 12 months. Mark Standard sheet.
Components	Y	N	N/A	Remarks
Staff permits presenters to distribute ICE-approved materials.		-		
Interpreters are admitted when necessary to assist attorneys and other legal representatives.				
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.				

GROUP LEGAL RIGHTS PRESENTATIONS								
Policy: Facilities housing ICE detainees shall permit authorized persons to make presentations to groups of detainees for the purpose of informing them of U.S. immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.								
☐ Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.								
Components	Y	N	N/A	Remarks				
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.								
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.								
A copy of the Gropup Legal Rights Presentation policy, including attachments, is available to detainees upon request.								
☐ Acceptable ☐ Deficient		☐ At	-Risk	Repeat Finding				
Remarks: (Record significant facts, observations	, other s	ources	used, e	elc.)				

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DETAINEE GRIEVANCE PROCEDURES

Policy: Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

Components	Y	N	N/ A	Remarks
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.				The facility written procedure is contained in policy 803.03 "Prisoner Grievances". A detainee has 30 days from the date of the incident to make his/her concern known.
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	⊠			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	×			

DETAINEE GRIEVANCE PROCEDURES

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Components	Y	N	N/ A	Remarks
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. If yes, explain.				
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				
☑ Acceptable ☐ Deficient		□ A	t-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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Auditi	Date	

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

Policy: ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Y	N	N/A	Remarks
The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels. The supply of these items exceeds the minimum required for the number of detainees.				Policy and Procedure 806.02 "Personal Hygiene, Grooming and Sanitation" addresses the regular issue and exchange of clothing, bedding, lines and towels.
All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear.	⊠			Detainees receive one uniform, one pair of socks, and one pair of shower shoes upon remand to the facility.
Additional clothing is available for changing weather conditions, or as seasonally appropriate.				Coats with hoods are provided for detainees if they participate in outdoor recreation during cold weather.
New detainees are issued clean bedding, linens, and towels. They receive at a minimum: One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.				The detainees are issued: Two blankets, two sheets, one pillowcase, and one towel. The mattresses remain in the housing unit. Additional blankets are issued in the weather dictates the need.

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS Policy: ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention. Components N/A Remarks Detainees are provided clean clothing, Per P&P 806.02 and the prisoner linen and towels. handbook, clothing exchange is 2 times Socks and undergarments a week. Detainees receive per week, a exchanged daily. total of 2 new sheets, one pillowcase, two complete uniforms, 3 pairs of Outer garments - twice weekly. underwear plus 2 towels. The facility Sheets - weekly. \boxtimes does not provide daily exchange of Towels - weekly. socks and underwear. Pillowcases - weekly. ☐ Deficient ☐ At-Risk Repeat Finding

Auditor's Signature / Date

	MARRIA	GÉ REC	UESTS	\$		
Policy: All detainee marris	age requests will receiv	/e case-b	y-case	consid	eration	from ICE management.
Components Y N N/A Remarks						
	☐ Deficient		☐ At-Risk			Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.) -

(b)(6),(b)(7)(C) 9-22-/7 re / Date

NON-MEDICAL EN	/EDCE	NCV E	8000	TEN TRIDE
Policy: The Immigration and Customs Enforce into the community for the purpose of visiting crattending funerals.	ement (ice) n	nay pro	ovide detainees with staff-escorted trips
Standard NA: Check this box if all ICE N by the ICE Field Office or Sub-Office In cont	on-Med rol of ti	dical E he deta	merge ainee	ency Escorted Trips are handled only case.
Components	Y	N	N/ A	Remarks
Each escort detail includes at (b)(7)(E) b)(7)(E)				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
☐ Acceptable ☐ Deficient		□ A	t-Risk	☐ Repeat Finding
(b)(6);(b)(7)(C) Significant facts, observations C J T Date	, other :	source	s usea	l. etc.)

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RECREATION

Policy: It is ICE policy to provide access to recreational programs and activities to all ICE detainees, to the extent possible, under conditions of security and supervision that protect their safety and welfare.

Components	Y	N	N/ A	Remarks
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.				This notice is provided on the incident report, which is provided to the detainee.
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	×			There is a recreation area for the SHU unit, which is used to provide recreation. Detainees are offered recreation 7 days a week for a one hour session.
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	×			This notice is provided on the incident report, or an Individual Determination Restriction (IDR) which is provided to the detainee.
Detainees have access to recreation activities outside the housing units for at least one hour daily. 5 days a week. If outdoor recreation is offered check this	⊠ box. I		□ □	Outside recreation is provided for at least one hour per day seven days per week, weather permitting.
outside the housing units for at least one hour		No fur	□ cher in	least one hour per day seven days per week, weather permitting.

	RE	CREATION	
Policy: It is ICE policy the extent possible, under	to provide access to reconditions of security a	reational programs and nd supervision that prote	activities to all ICE detainees, to ect their safety and welfare.
⊠ Acceptable	☐ Deficient	☐ At-Risk	☐ Repeat Finding
Remarks: (Record significa	ant facts, observations, o	other sources used, etc.)	

(b)(6),(b)(7)(C) Au / Date

REL	.iGiou	S PR	ACTIO	:ES
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Policy: Facilities will provide ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

Components	Υ	N	N/A	Remarks
Detainees are allowed to engage in religious services.				A schedule of religious services is posted in the living units to inform detainees of opportunities to partake in services.
Each detainee is allowed religious items in his/her immediate possession.	⊠			The detainees are allowed to have bibles, Korans, prayer rugs, crucifixes and religious medallions.
The facility allows detainees to observe the major "holy days" of their religious faith. List any exceptions.				
☑ Acceptable ☐ Deficient	☐ At-Risk			☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6)(6)(6)(7)(C)

(7-77-/-7)

DETAINEE TELEPHONE ACCESS

Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.

terepriories.				
Components	Y	N	N/A	Remarks
Detainees are allowed access to telephones during established facility waking hours.	⊠			Policy and Procedure 810.01 "Prisoner Access to Telephones" is the defining policy. Detainees have access to the telephones from 0800 to 2200 excluding count times.
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.				There are 45 phones in the west building and 51 in the east building.
Access rules are nosted in housing units				There is a posting of basis taleshape
Access rules are posted in housing units.	×			There is a posting of basic telephone rules.
Telephones are inspected regularly by facility staff to ensure that they are in good working order.	×			

DETAINEE TELEPHONE ACCESS Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones. Components N/A Remarks The facility provides the detainees with the ability to make non-collect (special access) calls. X The OIG phone number for reporting abuse The OIG phone number for reporting is programmed into the detainee phone abuse is programmed into the system and the phone number was checked detainee phone system. by the inspector during the review. X Special Access calls are at no charge to the detainees. \boxtimes When detainee phone calls are monitored. A monitoring notification is posted on notification is posted by detainee telephones each detainee telephone. that phone calls made by the detainees may be monitored. Special Access calls are not monitored. \boxtimes

DETAINEE TELEPHONE ACCESS Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones. Components N/A Remarks No restrictions are placed on detainees

service providers who are on the approved "Free Legal Services List".	⊠		
Detainees are allowed to return emergency phone calls as soon as possible.			
Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	×		In accordance with policy.
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	×		Detainees in disciplinary segregation are allowed legal calls.

DETAINEE TELEPHONE ACCESS Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones. Components N/A Remarks Detainees in disciplinary segregation are Consular/Embassy officals are allowed phone calls to consular/embassy considered legal calls. officials. \boxtimes Detainees in disciplinary segregation are If the Emergency has been verified. allowed phone calls for family emergencies. \times ■ Deficient ☐ At-Risk □ Repeat Finding Remarks: (Record significant facts, observations, other sources used, etc.)

VISITATION

Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.

Components	Y	N	N/A	Remarks
There is a written visitation schedule and hours for general visitation.	⊠			
The visitation schedule and rules are available to the public.	⊠			The visitation schedule and rules are available via the telephone, posted on the departmental website and posted at both facilities.
The hours for all categories of visitation are posted in the visitation waiting area.	⊠			Visitation categories and hours are posted in the visitation waiting area in both buildings.
Legal visitation is available seven (7) days a week, including holidays	×			

VISITATION Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media. On regular business days legal visitation Per Policy and Procedure 810.02 hours provide for a minimum of eight (8) "Visitation" legal visitation is available hours per day and a minimum of four hours every day between the hours of 0800 per day on weekends and holidays. to 2200. X \Box A general visitation log is maintained. A visitation log is maintained via the ACOMS system. \boxtimes On regular business days, detainees are Legal visits are permitted to continue given the option of continuing a meeting with through a scheduled meal. a legal representative through a scheduled meal. \boxtimes Private consultation rooms are available for Per P&P 810.2, private rooms are attorney meetings. There is a mechanism for available for attorney meetings and the detainee and his/her representative to attorneys are permitted by policy to exchange documents. review or exchange legal materials. \boxtimes

VISITATION Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media. Provisions for NGO visitation as stated in the Coordintated with ICE Detention Standards are complied with. X The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas. \boxtimes When strip searches are required after every There are designated private secure contact visit with a legal representative, the visitation rooms for non-contact visits facility provides an option for non-contact with legal representatives. visits with legal representatives. \times Provisions for NGO visitation as stated in the Coordintated with ICE Detention Standards are complied with. \boxtimes

Detainees in special housing afficients	forded	×			Detainees in special housing units are afforded visitation per policy.
☑ Acceptable [A	t-Risk	Repeat Finding

(b)(6);(b)(7)(C)

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VOLUNTARY WORK PROGRAM Policy: In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections. Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section. N/ Components Remarks Α Detainees have the opportunity to participate in special details, however, are never allowed. to work outside the secure perimeter. \boxtimes Medical staff screen and formally certifies Policy and procedure 812.01 detainee food service volunteers; "prisoner employment" provides written procedures to medically Before the assignment begins screen food service volunteers prior As a matter of written procedure to beginning assignment. 図 Written procedures govern selection of Policy and Procedure 812.01 detainees for the Voluntary Work Program. "prisoner employment" governs selection of detainees for the work program. 冈

VOLUNTA	ARY W	ORK PR	OGR	AM		
Policy: In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.						
Check here if ICE detainees are not auth 324A, page 3 and move to next section.	orized	to work	c at th	ne IGSA facility. Mark NA on Form G-		
The facility complies with work-hour requirements for detainees, not exceeding: Eight hours a day. Forty hours a week.				P&P 812.02 dictates schedules and hours of work per week. The work hours do not exceed 8 hours a day, 40 hours a week.		
Detainees receive safety equipment/ training sufficient for the assignment	Ø					
Proper procedure is followed when an ICE detainee is injured on the job.	×			Detainees who are injured on the job are sent to the medical department for treatment.		
☑ Acceptable ☐ Deficient		☐ At	-Risk	☐ Repeat Finding		
Remarks: (Record significant facts, observations, other sources used, etc.) (b)(6)(b)(7)(C) Q-13-/7 Audit ure / Date						

Section II

Health Services Standards

HUNGER STRIKES

Pollcy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Components	Υ	N N	N/A	Remarks
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	⊠			Detainees are referred to the medical department whenever they declare a hunger strike, or if staff observes that the detainee is not eating.
CDFs and IGSAs immediately report a hunger strike to the ICE.				
The facility has established procedures to ensure staff respond immediately to a hunger strike.	×		. 🗆	The hunger strike section of the facility Health and Safety Program established procedures which include: Notification of and evaluation by medical staff; counseling of the detainee regarding the health risk of participation in a hunger strike; and monitoring of his/her food consumption and fluid intake.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. If yes, in an observation room?				Detainees on a hunger strike are housed in medical segregation or administrative segregation where isolated from other detainees.

HUNGER STRIKES Policy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives. Medical staff records the weight and vital Weight, vital signs and dipstick signs of a hunger-striking detainee at least urinalysis are performed and once every 24 hours. documented every day on the progress notes. \boxtimes П A signed Refusal of Treatment form is An Informed Waiver of Medical required of every detainee who rejects Treatment form is signed by detainees medical evaluation or treatment. rejecting medical evaluation or treatment. If the detainee refuses treatment and refuses to sign the form, the refusal will be documented by two \boxtimes staff witnesses. During a hunger strike, staff document and Trays are presented to hunger striking provide the hunger-striking detainee three detainees for all meals. Detainees are offered anything available if they will meals a day. eat. Nutritional fluid supplements are also offered. \boxtimes Staff maintains the hunger striker's supply of Detainees housed in medical drinking water/other beverages. observation room retain independent access to drinking water. Additional fluids are offered by nursing staff. \boxtimes

HUNGER STRIKES						
Policy: All facilities will follow standard guid detainees engaging in hunger strikes. By me facilities will strive to sustain their lives.	felines fo onitoring	or the r	nedical health	and administrative management of ICE and welfare of the individual detainees,		
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.				Intake is monitored and recorded on the progress notes.		
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	Ø			All treatment attempts are recorded on the progress notes.		
The medical staff has written procedures for treating hunger strikers.	×			The hunger strike section of the facility Health and Safety Program and the medical hunger strike intervention form establishes procedures for treating hunger strikers. These procedures include: monitoring (vital signs, weights, and laboratory testing as indicated); referral to mental health staff and to the physician or mid-level provider (nurse practitioner [NP] or physician's assistant [PA]); monitoring of fluid intake and food consumption; and counseling regarding the health risks of participating in a hunger strike.		
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remain current in evaluation and treatment techniques.	×			Medical staff receive training in hunger strike evaluation and treatment during orientation and periodically thereafter. Security staff are trained to notify medical staff whenever a detainee refuses meals.		

	HUN	GER STRIKES							
Policy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.									
⊠ Accepta	☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding								
(b)(6);(b)(7)(C)	gnificant facts, observations, o	other sources used, etc.)							

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

Components	Y	N	N/A	Remarks
Facilities operate a health care facility in compliance with State and Local laws and guidelines.	×			The health care facility is staffed by Alaska DOC employees.
The facility's in-processing procedures for arriving detainees include medical screening.	×			In accordance with policy 807.14 "Health Examinations" an RN conducts a brief evaluation of each detainee immediately upon their arrival at the facility to identify any urgent medical concerns. Detainees are referred to the physician/mid-level provider and/or mental health staff as clinically indicated for any identified concerns.

ACCESS TO MEDICAL CARE						
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.						
All detainees have access to and receive medical care.				Policy and Procedure 807.02 "Access to Medical Care" provides for medical care to all detainees.		
Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit; With physical access restricted to authorized medical staff; and Procedurally, no copies made and placed in detainee files.				Policy 807.06 "Health Care Record," requires medical records to be kept separate and confidential with access limited to medical staff. Active medical records in the east complex medical unit are stored in filing cabinets in the secure nurse's station. Archived medical records are stored in a secure medical records room. In the west complex the records are stored on shelves within the secure medical unit under supervision of medical staff. Copies are made only pursuant to a signed authorization for the release of medical information. No medical records are placed in the detainee files.		

ACCES	ACCESS TO MEDICAL CARE						
Policy: Every facility will establish and mainta general well-being of ICE detainees.	ain an a	occredite	ed/accr	editation-worthy health program for the			
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				Current staffing includes: 40 nurses for medical and mental health. 2MDs, 3 Nurse Supervisors, 1 medical clerks, 2 medical records technician. Mental Health staffing includes 1.5 psychiatrist (one position is shared betweeb another facility), 9 mental health professionals, A contact dentist and dental hygienist provide services 6 hours per week.			
Where staff is used to distribute medication, a health care provider properly trains these officers.	×			Medication is only distributed by medical staff.			

ACCESS TO MEDICAL CARE							
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.							
Dertention staff is trained to respond to health-related emergencies within a 4-minute response time.				All detention staff are trained in first aid and certified in CPR/AED.			
The medical unit keeps written records of medication that is distributed.	Ø			In accordance with policy 807.05 the administration of medication by nursing staff is documented on detainee specific Medication Administration Charts. The issuance of a medication for self-administration is also documented on the designated form and in progress notes in the detainee's medical record. The issuance of small packets of nonprescription medication by nursing staff in accordance with approved nursing protocols is documented directly in the detainee's medical record.			

Detainee's medical records or a copy thereof, are available and transferred with the detainee.			A medical summary noting TB status current medications, current and chronic medical problems, and any other significant medical concerns is prepared for transfer with each detainee. Full medical records are retained by the facility.
	×		
Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test. During the admission process. Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility. Detainees not screened are housed separate from the general population.	\boxtimes		All detainees receive a TB test (PPD) as part of the intake screening, unless they have a current test documented or a history of positive TB test. A detainee who arrives with a history of a previous positive test is screened for the signs and symptoms of active TB disease and placed in the negative airflow room pending completion of a chest x-ray to confirm the absence of active TB disease

ACCESS TO MEDICAL CARE								
	Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.							
All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit.				The booking nurse completes a mental health screening as part of the intake screening process.				
	X							
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				Policy and Procedure 807.14 "Health Examinations" states, "health care staff shall offer to perform a health appraisal for each prisoner within 14 days of the initial incarceration. Prisoners receive physical examinations when medically indicated.				

ACCES	S TO M	EDICA	L CAR	E
Policy: Every facility will establish and maint general well-being of ICE detainees.	ain an a	ccredit	ed/acci	reditation-worthy health program for the
Detainees in the Special Management Unit have access to health care services.				Detainees in the SHU have the same access to health care as general population detainees. P&P 807.11 "Sick Call" addresses this. Nursing staff visit the SMU for medication administration and to follow up on specific detainee medical concerns three times each day.
Staff provides detainees with health- services (sick call) request slips daily, upon request. Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider.	⊠			Requests for Medical Care, DOC form 807.02A are available in all housing units. They are only available in English. Completed forms are deposited by the detainee into a locked medical mailbox in each housing unit. They are collected daily and triaged by a health care provider.

Policy: Every facility will establish and maint general well-being of ICE detainees. The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	ain an a		
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	×		

ACCES	SS TO N	EDICA	L CAR	<u> </u>
Policy: Every facility will establish and maint general well-being of ICE detainees.	tain an i	accredit	ed/acc	reditation-worthy health program for the
A signed and dated consent form is obtained from a detainee before medical treatment is administered.				Policy 807.08 'Informed Consent' requires that a detainee be given information regarding procedures and alternatives and risks of any proposed medical treatment. However, procedure specific written consent is only required for an invasive procedure or where the recommended treatment poses potential risks as well as benefits for the detainee. Except in these circumstances, detainees in this facility do not sign a consent form before medical treatment is administered. Verbal consent is accepted.
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".				Medical records transferred with a detainee are placed in an appropriately marked and scaled envelope.
	×			
☐ Acceptable ☐ Deficient		☐ At	-Risk	☐ Repeat Finding
Remarks: (Record significant facts, observations (b)(6),(b)(7)(C)	, other s	ources	used, e	etc.)

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SUICIDE PREVENTION AND INTERVENTION

Policy: All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.

Components	Y	N	N/A	Remarks
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.				Policy and Procedure 807.20 "Suicide Prevention and Awareness." Staff receives suicide prevention/intervention training at the academy as part of the initial orientation and annual training thereafter at the facility from mental health staff.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; Understand and apply suicide-prevention techniques.	Ø			Policy and Procedure 807.20 "Suicide Prevention and Awareness." Staff receives suicide prevention/intervention training at the academy as part of the initial orientation and annual training thereafter at the facility from mental health staff.
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. Screening does not occur later than one working day after the detainee's arrival.	⊠			In accordance with policy 807.14 "Health examinations" and 807.20 "Suicide Prevention and Awareness" screening for suicide potential is included in the intake medical screening conducted by an RN during in-processing. This screening is completed within an hour of the detainee's arrival at the facility. If a detainee is identified as being at risk for suicide, they are referred to mental health staff and placed on suicide watch pending evaluation.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	⊠			Policy 807.20 establishes procedures for the prompt referral of at risk detainees to mental health staff.

SUICIDE PREVENTION AND INTERVENTION

Policy: All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.

Components]- Y-		Ñ/A	Remarks
The facility has a designated isolation room for evaluation and treatment.				In the east complex holding cells in the booking area have been designated for the evaluation and treatment of detainees at risk for suicide. In the west complex detainees are initially placed in a holding cell in the booking area. If per the evaluation conducted by the mental health staff the detainee is determined to be at continued risk, the detainee is moved to an observation cell in the mental health unit.
The designated isolation room does not		 		The rooms are stripped and the detainee is
contain any structures or smaller items that could be used in a suicide attempt.	⊠			placed in a suicide gown and/or blanket.
Medical staff has approved the room for this purpose.				
	⊠			
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Ø			P&P 807.20 states that visual checks will be conducted every 5 to 15 minutes and documented.

	idal individuals wi	etainees v Ih sensiti	vill be tra	ined to rec	cogníze suicide-risk indicators. Staff and referrals. A clinically suicidal
Components	Y	N	N/A		Remarks
	☐ Deficient		☐ At	-Risk	☐ Repeat Finding
Remarks: (Record significant	facts, observation	s, other s	cources (used, etc.)	

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally III or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

references to detainee death and related notifications.							
Components	Y	N	N/A	Remarks			
The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. The detainee's location. The visiting hours and rules at that location.	×			Policy 808.17 "Notification of serious Illness, Injury or Death of a Prisoner" does not address notification of ICE in the events of an ICE detainee's serious illness; however ICE is notified of any such illness.			
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	×			If the detainee requires services that the institution can't provide they are transferred to an offsite medical facility. If the institution can provide the service then the detainee will be housed in medical segregation.			
There is a policy addressing "Do Not Resuscitate Orders"		×		The facility does not have a policy that addresses this issue.			

Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.								
Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.								
Components	Y	N	N/A	Remarks				
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	×			If a detainee was admitted to the facility with an existing DNR order, all therapeutic measures short of resuscitation would be provided.				
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.				Ice would be notified of any significant medical issue (including a DNR order) involving an ICE detainee.				
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.		×		The facility does not provide guidelines addressing advance directives.				

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

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				, AND DEATH
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Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Y	N.	N/A	Remarks
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.		M		P&P 104.04 and 1208.28 "death of a prisoner" and 808.17 "Notification of Serious Illness, Injury or Death" address notification of family members. These policies do not address notification of ICE in the event of an ICE detainee's death; however ICE would be notified immediately of this situation.
The facility has a policy and procedure to address the death of a detainee while in transport.			×	The facility does not transport detainees.
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: Performance of an autopsy; Who will perform the autopsy; Obtaining state approved death certificates; and Local transportation of the body.				In accordance with Policy 104.04 and 808.17, the local medical examiner is to be notified of any detainee death. Performance of an autopsy is dependent on the circumstances of each death.
⊠ Acceptable ☐ Defic	ient		☐ At-	Risk Repeat Finding

Remarks: (Record (b)(6);(b)(7)(C)	significant facts,	observations,	other	sources (used.	etc.)
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Section III

Security and Control Standards

Policy: All detention facilities will ensure the proper handling and disposal of all contraband. Documentation of contraband destruction is required.							
Components	Y	N	N/ A	Remarks			
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	Ø			Standard Operating Procedure 61.1208.08 "Contraband" describes procedures for the handling of contraband.			
		A	t-Risk	☐ Repeat Finding			

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C)		9-72-17
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DETENTION FILES

Policy: Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.

Components	Y	N	N/A	Remarks
A detention file is created for every new arrival whose stay will exceed 24 hours.				Policy 602.01, Prisoner Case Record Management requires a file to be started upon initial incarceration.
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	×			Policy indicated that appropriate documents are included in the detainee file.
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same	Ø			Files are opened on all detainees regardless of stay. Files included substantial, relevant, information
The detention files are tocated and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	×			The records staff manages the files in a secure office.

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Policy: Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.

Components	Y	N	N/A	Remarks
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	⊠			All appropriate documentation is forwarded for inclusion in the detention file.
			∖t-Risk	Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C) 9-72-/7
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DISCIPLINARY POLICY

Policy: All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Components	Y	N	N/A	Remarks
The facility has a written disciplinary system using progressive levels of reviews and appeals	⊠			Policy and Procedure 809.02 "Prohibited Acts and Penalties" and 809.04 "Disciplinary Committee/Hearing Officer and Basic Operation."
The facility rules state that disciplinary action shall not be capricious or retaliatory.	×			
Written rules prohibit staff from imposing or permitting the following sanctions:	\boxtimes			Policy and Procedure 804.02 "Punitive Segregation" addresses these issues.
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	×			These items are defined in Policy and Procedure 809.02 "Prohibited Acts and Penalties" as well as in the Prisoner Handbook.

DISCIPLINARY POLICY

Policy: All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Components	Υ	N	N/A	Remarks
Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	Ø			·
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Ø			Informal resolution is covered in Policy and Procedure 809.04. Attempts at informal resolution are required.
A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence imposes only authorized sanctions	⊠			Policy 809.04 "Disciplinary Committee/Hearing Officer and basic Operations" addresses this issue.
☐ Acceptable ☐ Deficient			t-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C) 9-22-/7

EMERGENCY (CONTINGENCY) PLANS

Policy All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Y	N	N/A	Remarks
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	×			The Superintendent oversees the Emergency Planning Group consisting of the Procedures Sgt, Asst. Superintendent's and two correctional supervisors. They develop, revise, renew, and implement institutional emergency plans.
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	⊠			SOP 61.1208.16 titled "General Emergency Response Procedures"
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	×			P&P 1208.16 and SOP 61.1208.16 identify medical treatment in the following Emergency Procedures. Bomb Threat, Fire Safety Procedures, General Emergency Response Procedures, Hostage Situation, Natural Disaster, and Riot Control.
The plans address the following issues: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions	×			The facility emergency plans are maintained in a limited number of red binders. Access is strictly limited and no copying of emergency plans is allowed. The plans are reviewed annually and revisions are made as needed.

Policy All facilities holding ICE deplan to minimize the harming of hu	man life and t Memorandur	respond the des	d to en truction	rergenc of prop	ANS ies with a predetermined standardized perty. It is recommended that SPCs and (MOU), with federal, local and state
Components		Ÿ	N	N/A	Remarks
☑ Acceptable ☐	Deficient			t-Risk	Repeat Finding
Acceptable Remarks: (Record significant facts,		other :			

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	-Ϋ́	N	N/A	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				The facility has a warehouse that maintains inventories on all hazardous materials received and stored.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective • Equipment. • Report hazards and spills to the • designated official.	⊠			Appropriate personal protective equipment is available and used by all personnel as required by the safety data sheets.
The MSDSs are readily accessible to staff and detainees in the work areas.				
Hazardous materials are always issued	×			Sanitation food service and laundry
under proper supervision. under proper supervis	⊠			Sanitation, food service and laundry chemicals are diluted with automated injection systems prior to being used or handled by detainees.

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.				
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	×			
The facility has sufficient ventilation and provides and ensures clean air exchanges throughout all buildings.				
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	×			The temperature is controlled thermostatically in the boiler rooms of the East and West Complexes.

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

١	Components	Y	N	N/A	Remarks
	All toxic and caustic materials stored in their original containers in a secure area.	Ø			Toxic and caustic chemicals are stored in the warehouse and issued as needed.
	Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	\boxtimes			Employees receive initial and annual training.
	A technically qualified officer conducts the fire and safety inspections.				
	The facility has an approved fire prevention, control, and evacuation plan.	⊠			Policy and Procedure 802.01 "Fire and Emergency Procedures" addresses fire prevention, control and evacuations. SOP 61.1208.16 "Fire Saftey" alsoaddresses evacuation plans.

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components]	N	N/A	Remarks
Written procedures regulate the handling and disposal of used needles and other sharp objects.	Ø			Policy and Procedure 202.03 "Blood Borne Pathogens" details the handling and disposal of used needles and other sharp objects.
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	×			
Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	×			Training is provided to each new employee and annually thereafter.
The facility follows standard cleaning procedures.	×			

	ENVIRONMEN	NTAL F	IEALTI	I AND SAF	ETY		
Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures							
Componen	ts	Ý	N	N/A	Remarks		
	☐ Deficient			At-Risk	Repeat Finding		
Remarks: (Record significants) (D)(6),(b)(7)(C) Audit ure / Date	nt facts, observation	ns, othe	er sourc	es used, et	c.)		

HOLD ROOMS IN DETENTION FACILITIES

Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.

LOTA fleatings, medical deathlets, mad-rading movement, or other processing into or our or and identify.								
	Components	Y	N	N/A	Remarks			
f	ul detainees are given a pat down search or weapons or contraband before being laced in the room.	×			All detainies are pat searched for weapons at the onset of the booking process. Policy 811.04 covers this topic.			
ir	here is a written evacuation plan that notudes a designated officer to remove etainees from hold rooms in case of fire nd/or building evacuation.	⊠			The facility has a written evacuation plan which specifies how booking is to evacuate the building. 61.1208.16 "Fire Safety Procedures, Equipment, and Evacuation Plan"			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	etainees under the age of 18 are not held with adult detainees.		×					
Ι.	etention in hold rooms is limited to 12 ours.	×			The facility uses the hold rooms for a variety of purposes other than processing detainees into/out of the facility. For example, detainees being held for suicidal protocol, medical or detoxification purposes may be held in the hold rooms for longer than 12 hours. However, detainees being processed into the facility are generally processed in one to two hours and moved to the housing units.			

HOLD ROOMS IN DETENTION FACILITIES Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility. N/A Remarks Components Ÿ Ν Females are only housed in alpha 2 Male and females are segregated from module. No male offenders are each other. allowed to enter this module. \boxtimes Officers closely supervise the detention The booking process for the facility hold rooms using direct supervision. is performed at the East complex (Irregular visual monitoring.). booking area. Each holding cells in Hold rooms are irregularly booking is equipped with an in cell video camera which allows booking monitored every 15 minutes. staff to continuously monitor Unusual behavior or complaints are \boxtimes detainees in the holding cells. noted. ■ Deficient ☐ At-Risk Repeat Finding

	tc.)
9-22-17 Ature / Date	

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

Components	Υ	N	N/A	Remarks
The security officer, or equivalent in IGSAs, provides training to employees in key control.	×			The Training Officer provides training in key control.
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	Ø			Inventories are maintained of all locks, keys and locking devices.
Facility policies and procedures address the issue of compromised keys and locks.	⊠			Policy and Procedure 1208.03 "Key Control" addresses this issue.
Padlocks and/or chains are prohibited from use on cell doors.	\boxtimes			The facility does not allow padlocks or chains to be used on cell doors. The food port in the cell doors is secured by a padlock; however, these padlocks do not interfere with the operation of the cell doors.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks. \Box

Components	Y	N	N/A	Remarks
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily	×			Keys that are maintained in the control centers are counted at the beginning of each shift.
⊠ Acceptable ☐ Deficient			Al-Risk	Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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Policy: All detention facilities shall ensure around-the-clock accountability for all detainees. This requires that they conduct at least one formal count of the detainee population per shift, with additional formal and informal counts conducted as necessary.

Components Staff conducts a formal count at least once each shift.	<u>Y</u>	_N	N/A	Remarks The facility conducts 8 formal counts
each sant.				in a 24 hour period.
A face-to-photo count follows each		-	<u> </u>	After 2 unsuccessful counts a face to
unsuccessful recount.	፟			photo count is conducted.
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	⊠			The facility booking staff in the west building and the court rovers in the east building maintains the facility out-count record of detainees leaving the facility.
Written procedures cover informal and emergency counts. They followed during informal counts. During emergencies.	⊠			Policy 1208.14 addresses informal and emergency count procedures.
☑ Acceptable ☐ Deficient		□ A	t-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C) 9-23-17 Date

POST ORDERS Policy: ICE provides officers all necessary guidance for carrying out their duties. This guidance includes							
the post orders established for every post, w upon assignment to that post.	hich are	e reviev	ved at I	east annually, and given to each officer			
Components	Ŷ	N	N/A	Remarks			
Every Fixed post has a set of post orders.							
Every armed-post officer qualifies with the				ACC does not have armed posts.			
post weapon(s) before assuming post duty.	П			However, all officers that are issued weapons for emergency procedures are qualified on those weapons.			
			2				
The IGSA maintains a complete set (central file) of post orders.	🔯			All the post orders are found on the g-drive.			
]]				
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.				Policy Addresses reviews.			
	☒						

Components	Y	N	N/A	Remarks
rmed-post post orders provide instructions or escape attempts.			⊠	ACC does not have armed posts
☑ Acceptable ☐ Deficient	— <u>—</u>	<u></u>	t-Risk	☐ Repeat Finding

SECURITY INSPECTIONS

Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.

Components	Y	N	N/A	Remarks
The facility has a comprehensive security inspection policy. The policy specifies: Posts to be inspected Required inspection forms Frequency of inspections Guidelines for checking security features Procedures for reporting weak spots, inconsistencies, and other areas needing improvement				Policy 1208.08 "Security Inspections" addresses this component.
All visits are officially recorded in a visitor logbook or electronically recorded.	⊠			Visits are logged either in the ACOMS system or in the logbook. However, verified Peace Officers are not required to log in.
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	⊠			
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	\boxtimes			

	SEC	URITY I	NSPEC	TIONS			
Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.							
Component	S	Y	N	N/A	Remarks		
Written procedures govern detainee housing units and		5 21			Policy 1208.08 covers this topic.		
		⊠					
⊠ Acceptable	Deficient			At-Risi	Repeat Finding		
Rei (b)(6);(b)(7)(cord significan	l facis, observatio	ns, othe	r source	es used	l, etc.)		

Components	Ý	N	N/A	Remarks
 The detainees are provided: Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 	⊠			Provided but on a more limited basis than general population.
Procedures comply with the "Visitation" standard. • The detainee retains visiting privileges; and The visiting room is available during normal visiting hours.	×			
Visits from clergy are allowed.				

Components	Y	N	N/A	Remarks
Detainees have the same law-library access as the general population. • Are they required to use the law library: Separately or ☐ As a group? Are legal materials brought to them?				The SMU at both the east and West complexes have a LexisNexis computer available. Detainees may sign up to use the LexisNexis and are allowed out of their cell one at a time to use this computer. Detainees in Echo west module, which is a protective custody module, will go to law library together.
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. • Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent).	×			
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. Detainees are placed in the SMU (administrative) in accordance with written criteria.	⊠			The SMU at both the east and West complexes have a LexisNexis computer available. Detainees may sign up to use the LexisNex's and are allowed out of their cell one at a time to use this computer. Detainees in Echo west module, which is a protective custody module, will go to law library together.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. A copy of the order given to the detainee within 24 hours.	⊠			Emergency placement in Administrative Segregation is allowed by policy with documentation required.

Components	Y	N	N/A	Remarks
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	⊠			
The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. • A written record is made of the decision and the justification. • The detainee receives a copy of this record.	×			The Superintendent reviews every review.
A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays.	×			Policy 807.11 "Sick Call" requires that health care officials visit the segregation unit daily and document their visits in the log book (in accordance with policy 803.11 "Permanent Record Log").
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	⊠			Policy 804.01 addresses this issue.

Components	Υ	N	N/A	Remarks
All cells are equipped with beds. Every bed is securely fastened to the floor or wall.				Beds are securely fastened to the floor and wall.
The SMU maintains a permanent log. • Detainee-related activity, e.g., meals served, recreation, visitors etc.				Each SMU at the East and west complex maintains a segregation logbook noting the daily activity of each detainee.
	×			
☑ Acceptable ☐ Deficient			\t-Risk	☐ Repeat Finding

(b)(6);(b)(ord significant facts, observations, other sources used, etc.)
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Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Components	TY	N	N/A	Remarks
Officers placing detainees in disciplinary segregation follow written procedures.				Policy and Procedure 804.02 "Punitive Segregation" specifies the criteria for housing detainees in Disciplinary Segregation.
The sanctions for violations committed during one incident are limited to 60 days.				The facility limits the sanctions for a single incident to 60 days.
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.				
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. After each formal review, the detainee receives a written copy of the decision and supporting reasons.				Detainees receive a copy of the formal review and decision. Facility procedures specify the intervals at which detainees in disciplinary segregation are reviewed.

Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Components	Y	N	N/A	Remarks
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.				Beds are securely fastened to the floor and wall.
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	⊠			A detainee who is placed on "dry cell" status is generally moved to one of the facility booking cells which allows for better visual observation of the detainee. Detainee in this status are reviewed each shift and items are returned as soon as it is safe to do so.
Oetainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. Food is not used as punishment.	×			
 SMU detainees have law library access. Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. 				Each segregation unit has a computer that utilizes LexisNexis. Detainees may sign up to use it and are allowed out of their cell one at a time to use the computer.

Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Н		T 14		T	
L	Components	Y	N	N/A	Remarks
	When phone access is limited by number or type of calls, limits do not apply to the following: Calls about the detainee's immigration case or other legal matters. Calls to consular/embassy officials. Calls during family emergencies (as determined by the OIC/Warden).				Detainees sign up for these types of calls and they are completed as soon as possible
	Detainees receive, unless documented as a threat to security: Barbering services; Recreation privileges: Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material.	×			Provided according to Policy and Procedure 804.02 "Punitive Segregation."
(A health care professional visits every detainee in disciplinary segregation every day. Monday through Friday. The shift supervisor visit each segregated detainee daily Weekends and holidays.				Health care officials are required to visit the segregation unit daily and documented in the segregation log.
`	The clergy are allowed. The clergy member given the option of visiting/not visiting the segregated detainee. Violent/uncooperative detainees denied access to religious services when safety and security would otherwise be affected.				Clergy visitation is documented in the unit logbook.

Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Components	Y	N	N/A	Remarks
SMU detainees receive legal visits, as provided in the "Visitation" standard. Legal service providers are notified of security concerns arising before a visit.	⊠			
☑ Acceptable ☐ Deficient			At-Risk	☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

9-22-1-7

	TOOL	CONTE	201	
Policy: It is the policy of all facilities that a control policy. The Maintenance Superviso Inventory list of tools and equipment and the current, filed and readily available for tool inv	all emplo or shall e location	oyees s mainta	shall be	mputer generated or typewritten Master
Components	Y	N	N/A	Remarks
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.				The facility maintenance supervisor is responsible for developing tool control procedures and an inspection system for both the East and West complexes.
The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required.				Policy and Procedure 1208.05 "Control of Tools and Equipment" call for the regular inventory of all tools. The East and West complex regularly inventory their knives. The medical clinics do not perform regular inventories of their tools or sharps. The maintenance department performs regular inventories of tools.
Each facility has procedures for the issuance of tools to staff and detainees.	\boxtimes			The maintenance department uses a chit system and a sign in/out sheet for issuing tools. The kitchen uses a sign in/out sheet for knives.

Remarks: (Record significant facts, observations, other sources used, etc.)

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☐ At-Risk

Repeat Finding

TRANSPORTATION (Land Transportation)

Policy The Immigration and Naturalization Service will take all necessary precautions to protect the lives, safety, and welfare of our officers, the general public, and those in ICE custody during the transportation of detainees. Standards have been established for professional transportation under the supervision of experienced and trained Detention Enforcement Officers or authorized contract personnel.

Standard NA: Check this box if all ICE Transportation are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Y	N	N/A	Remarks
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.				
 Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 				
☐ Acceptable ☐ Deficien	nt] At-Ris	sk Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C)

Components	Y	N	N/A	Remarks
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	×			Policy and Procedure 1207.01 "Use of Force/Use of Restraints"
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.	×			Policy and Procedure 1207.01 "Use of Force/Use of Restraints" outlines immediate and calculated use of force.
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.				

	· ·		~	
Components	Y	N	N/A	Remarks
The facility subscribes to the prescribed Confrontation Avoidance Procedures. Ranking detention official, health professional, and others confer before every calculated use of force.	×			Confrontation avoidance is stressed at the facility and medical staff is consulted.
Staff:				
 Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	×			
Staff members are trained in the performance of the Use-of-Force Team				
Technique.	⊠			
Standard procedures associated with using four/five point restraints include:				
(b)(7)(E)	⊠			

Components	Y	N	N/A	Remarks
stiffness.	 	+	+	
 Medical evaluation of the restrained detainee twice per eight-hour shift. 				
 When qualified medical staff are not immediately available, staff position the detainee "face-up." 				
The shift supervisor monitors the detainee's position/condition every two hours.				Detainee is monitored by a supervisor
He/she allows the detainee to use the				every two hours and is checked by a unit officer every 15 minutes.
restroom at these times under safeguards.				Detainees are allowed to use the rest
				room under safeguards.
				•
All use-of-force incidents are documented	-			Policy and Procedure 1207.01 "Use of
and reviewed.			[Force/Use of Restraints* all incidents are documented and reviewed.
				are desiriorities and terrorities.
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	!			
All detainee checks are logged.				
	\boxtimes	, _{[-}		
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Components	Y	N	N/A	Remarks
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.				Medical staff is consulted before and after a use of force situation.
When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized.	×			The Facility UOF policy specifies medical staff will be consulted before staff use non-lethal weapons.
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.			⊠	Medication is not used for restraint purposes at ACC.
Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted	⊠			Policy and Procedure 1208.05 "Transportation of Prisoners" details if restraints are used and care must be taken to protect the prisoner and her fetus.

		USE O	FFOR	CE	
after all other reasonable e gain control of the detaine serious property damage ar	fforts to resolve a e, to protect and nd to ensure institu	situatio ensure ition se	n have the sacurity a	failed. (afety of o nd good	use of force only as a last alternative Only that amount of force necessary to detainees, staff and others, to prevent order may be used. Physical restraints may be employed when the detainee:
Component		Y	N	N/A	Remarks
⊠ Acceptable	☐ Deficient			At-Risk	Repeat Finding
Remarks: (Record significan (b)(6)(b)(7)(C) C A	t facts, observation	ns, othe	r sourc	es used,	etc.)

STAFF DETAINEE COMMUNICATIONS

Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Y	N	N/A	Remarks
			This information is not provided in the facilities handbook; however, it is included in the ICE National Detainee Handbook.
			Visits are posted and outlined in the prisoner handbook.
	J		
⊠			

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Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Components	Y	N	N/A	Remarks
ICE/DRO staff respond to a detainee request from a facility within 72 hours.				
The facility treats detainee correspondence to ICE/ERO staff as Special Correspondence.	⊠			
ICE information request Forms are available at the IGSA for use by ICE detainees.				Detainees use the facilities request forms to correspond with ICE.
Acceptable Deficient		A	t-Risk	☐ Repeat Finding

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G-JJ-/e / Date

DETAINEE TRANSFER STANDARD

Policy: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Y	N	N/A	
The detainee is provided with a completed Detainee Transfer Notification Form.				The detainee is provided a copy of the completed Detainee Transfer Notification Form just prior to transfer or during transfer.
Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	×			
Meals are provided when transfers occur during normally schedule meal times.	\boxtimes			A sack lunch would be provided to the detainee if transfer occurred during normal scheduled meal times.

DETAINEE	TRANSFER	STANDARD
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Policy: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	<u> </u>	N	N/A	Remarks
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 				·
For medical transfers: The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/ERO office. A medical transfer summary is completed and accompanies the detainee.				ICE staff does these transfers

	STANDARD

Policy: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Ÿ	N	N/A	Remarks
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.			Ø	
For medical transfers, transporting officers receive instructions regarding medical issues.	Ø			
			At-Risk	☐ Repeat Finding
				·

Rem<mark>ib)(6)(b)(7)(C)</mark>rd significant facts, observations, other sources used, etc.)

Auditors organizate / Date

The following items must be inspected for compliance with those Justice Core Standards not covered by the ICE Detention Standards:

	Standard – Policy Development and Monitoring			
	ltem	Y		N/A
1	Written Policy and Procedures are in place to provide staff with the necessary			****
	information to operate and maintain the facility on a daily basis and in accordance with local, state, and federal law	\boxtimes		
2	Written policy and procedure are reviewed annually and updated accordingly	X		
	Standard – Reporting Requirement		يا	
3	The facility provides for a system of monitoring through internal audits and reviews	N	-	
4	The internal administrative audit is separate from any external audits or reviews		Ħ	H I
5	Audit or inspection reports identify areas of concern, identify necessary corrective	_		
	action, and provide for a system follow-up	\boxtimes		
6	Audit and Inspection reports are maintained on file until at least the next review is	Ø	П	\neg
	conducted	_ KAI	<u> </u>	
	Standard - Direct Supervision			
7	To the extent Possible, physical plant design facilitates continuous personal		-	
	contact and interaction between staff and detainees in the housing unit and	\boxtimes		
	recreation / leisure areas.			i
8	Written policies and procedures are in place that outline a comprehensive program			
	that promotes and encourages staff/detainee communications. A daily rotation	\boxtimes		
	schedule should be established to ensure adequate staff coverage is provided		ш	
	throughout the meal.			
_	Standard - Cultural Diversity			
9	Staff are provided appropriate annual cultural diversity or sensitivity training. Such			
	training is designed and implemented in a fashion that will further enhance staff	\boxtimes		
	members' ability to communicate with detainees in an effective manner.			_
	DOJ Core Standards - Rating			
	IGSA's Only			
		<u> </u>		
	🛛 Acceptable 🗌 Deficient 🔲 Repeat Deficiency 🔲 At-Risk			

*Remarks: (Record significant facts, observations, other sources used, etc.)

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Components	Y	N	N/A	Remarks
The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.				Sexual abuse and Assault is not tolerated in this facility. Policy 808.19 "Sexual Abuse/Sexual Assault and Reporting" cover this area.
All staff are trained during orientation and in annual refresher training in the prevention and intervention areas required by the Detention Standard.	×			Staff are trained during orientation and per policy refresher training happens every two years.
The facility maintains written documentation verifying employee, volunteer, and contractor training.				

Components	Y	N	N/A	Remarks
Detainees are informed about the program in facility orientation and in the detainee handbook (or equivalent).				This information is available in the prisoner handbook. It is also on the orientation video which is played at least three times per day in the intake modules.
The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	Ø			The notice is posted in all the housing units.
Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential, and housed and counseled accordingly.				The Booking nurse completes part 1 of the PREA risk assessment form while the detainee is still in booking. Probation staff completes part 2 of the form when the detainee is moved to the housing units. This information is entered into our computer program ACOMS.

Components	Υ "	N	N/A	Remarks
A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.				Per policy, prisoners are re-classified.
There is prompt and effective intervention when any detainee is sexually abused or assaulted, and policy and procedures for required chain-of-command and immediate ICE reporting.	\boxtimes			

Components	Y	l N	N/A	Remarks
The facility uses a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.				The facility's General Emergency Response Procedures (61.1208.16) and departmental policy 808.19 "Sexual Abuse/Sexual Assault and Reporting" addresses this issue.
Care is taken to place a victimized detainee in a supportive environment that represents the least restrictive housing option available (e.g. protective custody), but victims are not held for longer than dive days in any type of administrative segregation except in highly unusual circumstances or at the request of the detainee.				

Components	Υ	N	N/A	Remarks
Staff suspected of perpetrating sexual abuse or assault are removed from all duties requiring detainee contact pending the outcome of an investigation.				The facility's General Emergency Response Procedures (61.1208.16) and departmental policy 808.19 "Sexual Abuse/Sexual Assault and Reporting" addresses this issue.
When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.				The facility's General Emergency Response Procedures (61.1208.16) and departmental policy 808.19 "Sexual Abuse/Sexual Assault and Reporting" addresses this issue.
	Ø			

Components	Ϋ́	N	N/A	Remarks
When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.				
Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	×			

Policy: This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexal abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims fo sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y] N	N/A	Remarks
Tracking statistics and reports are readily available for review by the inspectors.	×			
⊠ Acceptable ☐ Deficient			At-Risk	Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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